

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>11/10</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>32</i>	<i>11/30</i>
FORMALITY REVIEW	<i>DS</i>	<i>65085</i>	<i>8/31/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
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Best Available Copy

If more than 150 claims or 10 actions
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